



REC 15-379

Knollwood Energy of MA LLC  
P.O. Box 30  
Chester, New Jersey 07930

September 1, 2015

NHPUC 11SEP15PM2:57

Debra A. Howland  
Executive Director  
New Hampshire Public Utilities Commission  
21 South Fruit Street, Suite 10  
Concord, NH 03301-2429

Dear Ms Howland,

Enclosed please find the application for the Mariellen Joga system to be part of the Knollwood Energy of MA LLC (NH-II-13-089) Class II Photovoltaic aggregation for New Hampshire Renewable Energy Certificates (RECs) generated from customer-sited sources, pursuant to New Hampshire Code of Administrative Rules Puc 2506 (including new requirements 2506.01 and PUC 2506.02)

Customer and Facility Information

Mariellen Joga  
340 Bean Hil Rd  
Northfield NH 03276  
603-729-0789  
mcjoga@msn.com

The Nepool GIS ID # for this facility is: NON54337. Also enclosed are the Simplified Process Interconnection Application and Service Agreement, and the Certificate of Completion. An electronic version has been sent to [executive.director@puc.nh.gov](mailto:executive.director@puc.nh.gov).

Please do not hesitate to contact me if you have any questions regarding this application.

Thank you for your consideration,

Linda Modica  
New England REC Operations Manager  
**Knollwood Energy of MA LLC**  
973.879.7826  
[linda@knollwoodenergy.com](mailto:linda@knollwoodenergy.com)

Enclosures (3)



# State of New Hampshire Public Utilities Commission

21 S. Fruit Street, Suite 10, Concord, NH 03301-2429



## DRAFT APPLICATION FORM FOR RENEWABLE ENERGY CERTIFICATE (REC) ELIGIBILITY FOR CLASS I AND CLASS II SOURCES WITH A CAPACITY OF 100 KILOWATTS OR LESS

Pursuant to New Hampshire Administrative Code [Puc 2500](#) Rules including Puc 2505.08, Certification of Certain Customer-Sited Sources

- Please submit one (1) original and two (2) paper copies of the completed application and cover letter\* to:  
**Debra A. Howland, Executive Director, New Hampshire Public Utilities Commission**  
**21 South Fruit Street, Suite 10, Concord, NH 03301-2429**
- Send an electronic version of the completed application and the cover letter electronically to [executive.director@puc.nh.gov](mailto:executive.director@puc.nh.gov).
- The cover letter must include complete contact information and identify the renewable energy class for which the applicant seeks eligibility. Pursuant to Puc 2505.01, the Commission is required to render a decision on an application within 45 days of receiving a completed application.

If you have any questions please contact Barbara Bernstein at (603) 271-6011 or [Barbara.Bernstein@puc.nh.gov](mailto:Barbara.Bernstein@puc.nh.gov).

- Photovoltaic (PV) solar facilities are Class II resources. Contact [Barbara.Bernstein@puc.nh.gov](mailto:Barbara.Bernstein@puc.nh.gov) for assistance.

Eligibility Requested for: Class I ☐ Class II ☒ Check here ☐ if this facility part of an aggregation.

If the facility is part of an aggregation, please list the aggregator's name. Knollwood Energy of MA

- Provide the following information for the owner of the PV system.

Applicant Name Mariellen Joga Email [mcjoga@msn.com](mailto:mcjoga@msn.com)

Address 340 Bean Hil Rd City Northfield State NH Zip 03276

Telephone 603-729-0789 Cell \_\_\_\_\_

- For business applicants, provide the facility name and contact information (if different than applicant contact information).

Facility Name \_\_\_\_\_ Primary Contact \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Cell \_\_\_\_\_

Email address: \_\_\_\_\_

- Provide a complete list of the equipment used at the facility, including the revenue grade REC meter, and, if applicable, the inverter. Your facility will not qualify for RECs without a REC meter.

equipment	quantity	Type	equipment	quantity	Type
PV panels	26	SunEdisonF270	other		
Inverter	26	Enphase M215	other		
meter	1	CL200 204V 3W	other		

- A copy of the interconnection agreement and the approval to operate your PV system from your electric utility must be included with your application.
- For PSNH customers, both the *Simplified Process Interconnection Application* and *Exhibit B - Certificate of Completion* are required.

What is the nameplate capacity of your facility (found on your interconnection agreement)? 5.59 AC

What was the initial date of operation (the date your utility approved the facility)? 7/31/15

- Provide the name, license number and contact information of the installer, or indicate that the equipment was installed directly by the customer.

Installer  
 Name SunRay Solar Contact Michael Fay License # (if applicable) N/A  
 Address 124A Hall St City Concord State: N Zip 03301  
 Telephone (603) 225-6001 email michael@spreadthesunsheine.net

If the equipment was installed directly by the customer, please check here: ☐

- Provide the name and contact information of the equipment vendor.

☐ X Check here if the installer provided the equipment and proceed to the next question.

Business Name \_\_\_\_\_ Contact \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ email \_\_\_\_\_

- If an independent electrician was used, please provide the following information.

Electrician's Name Brian Pare License # 12245M



Business Name SunRay Solar, LLC Email Brian@SpreadTheSunshine.com  
Address 124A Hall St City Concord State NH Zip 03301

- **Provide the name of the independent monitor for this facility.** (A [list](http://www.puc.nh.gov/Sustainable%20Energy/Renewable_Energy_Source_Eligibility.htm) of approved independent monitors is available at [http://www.puc.nh.gov/Sustainable%20Energy/Renewable\\_Energy\\_Source\\_Eligibility.htm](http://www.puc.nh.gov/Sustainable%20Energy/Renewable_Energy_Source_Eligibility.htm).)

Independent Monitor's Name Paul Button Energy Audits Unlimited

Is the facility certified under another state's renewable portfolio standard? yes ☐ no ☒  
If "yes", then provide proof of the certification as **Attachment C**.

- *Please note, if your facility is part of an aggregation, your aggregator should provide you with the following information.*
- *In order to qualify your facility's electrical production for Renewable Energy Certificates (RECs), you must register with the NEPOOL – GIS. Contact information for the GIS administrator follows:*

James Webb  
Registry Administrator, APX Environmental Markets  
224 Airport Parkway, Suite 600, San Jose, CA 95110  
Office: 408.517.2174 [jwebb@apx.com](mailto:jwebb@apx.com)

If you are not part of an aggregation, Mr. Webb will assist you in obtaining a GIS facility code.

GIS Facility Code # NON54337 Asset ID # NON54337

- **Complete an affidavit by the applicant or qualified installer that the project is installed and operating in conformance with any applicable state/local building codes.** Use either the following affidavit form or provide a separate document.
- **The Commission requires a notarized affidavit as part of the application.**

#### AFFIDAVIT

The Undersigned applicant declares under penalty of perjury that the project is installed and operating in conformance with all applicable building codes. (please see attached)

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Printed Name Linda Modica

Subscribed and sworn before me this \_\_\_\_\_ Day of \_\_\_\_\_ (month) in the year \_\_\_\_\_

County of \_\_\_\_\_ State of \_\_\_\_\_

\_\_\_\_\_  
Notary Public/Justice of the Peace

- Complete an affidavit by the applicant or qualified installer that the project is installed and operating in conformance with any applicable state/local building codes. Use either the following affidavit form or provide a separate document.
- The Commission requires a notarized affidavit as part of the application.

---

#### AFFIDAVIT

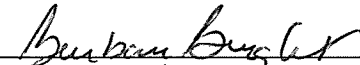
The Undersigned applicant declares under penalty of perjury that the project is installed and operating in conformance with all applicable building codes.

Applicant's Signature  Date 9/9/15

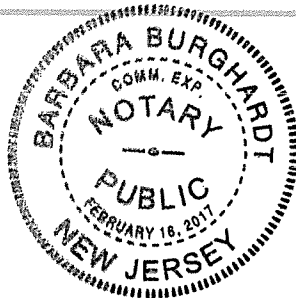
Applicant's Printed Name Linda Modica

Subscribed and sworn before me this 9 Day of September (month) in the year 2015

County of Morris State of New Jersey

  
Notary Public/Justice of the Peace

My Commission Expires 2/16/17



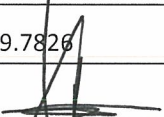
My Commission Expires \_\_\_\_\_

- Complete the following checklist. If you have questions, contact [barbara.bernstein@puc.nh.gov](mailto:barbara.bernstein@puc.nh.gov).

CHECK LIST: The following has been included to complete the application:	YES
• All contact information has been provided.	X
• A copy of the interconnection agreement. PSNH Customers should include both <i>the Interconnection Standards for Inverters Sized up to 100 KVA</i> <b>and</b> <i>Exhibit B – Certification of Completion for Simplified Process Interconnection</i> .	X
• Documentation of the distribution utility's approval of the installation.*	X
• If the facility is participating in another state's renewable portfolio standard (RPS) program, documentation of certification in other state's RPS.	
• A signed and notarized attestation.	X
• A GIS number obtained from the GIS Administrator.	X
• The document has been printed and notarized.	X
• The original and 2 copies are included in the packet mailed to Debra Howland, Executive Director of the PUC.	X
• An electronic version of the completed application has been sent to <a href="mailto:executive.director@puc.nh.gov">executive.director@puc.nh.gov</a> .	X
*Usually included in the interconnection agreement.	

- If the application has been prepared by someone other than the applicant, complete the following. If the application was prepared by the applicant, check here ☐ and skip this section.

**PREPARER'S INFORMATION**

Preparer's Name Linda Modica Email address: [linda@knollwoodenergy.com](mailto:linda@knollwoodenergy.com)  
Address PO Box 30 City Chester State NJ Zip 07930  
Telephone 973.879.7826 Cell \_\_\_\_\_  
Preparer's Signature: 



NEW HAMPSHIRE ELECTRIC CO-OP  
INTERCONNECTION APPLICATION-RENEWABLE GENERATION UP TO 1000 KW

PURSUANT TO NEW HAMPSHIRE ADMINISTRATIVE RULE PUC 900, APPLICANT HEREBY  
GIVES NOTICE OF INTENT TO INSTALL AND OPERATE A GENERATING FACILITY.

Section 1. Applicant Information

Name: Meriellen Joga  
Mail Address: 340 Bean Hill Road  
City: Northfield State: NH Zip Code: 03276  
Facility Location (if different from above): \_\_\_\_\_  
Daytime Phone #: 603729-0789  
Distribution Utility: New Hampshire Electric Cooperative, Inc. Account #: [REDACTED]  
Electricity Supplier (ES): \_\_\_\_\_ Account #: \_\_\_\_\_

Section 2. Generating Facility Information

Generator Type (check one): Solar ☒ Wind \_\_\_\_\_ Hydro \_\_\_\_\_  
Generator Manufacturer, Model Name & Number: SunEdison Silvantis F-Series F270W  
Number of Phases of Unit: Single, Three or Other: Single Phase  
Generation output rating in AC & DC Kilowatts: 26 F270 Panels 7.02kW DC, 26 M215 Inverters 5.59 Kw AC  
Inverter Manufacturer, Model Name & Number: Enphase M215  
Battery backup? ☐ Yes ☒ No  
Will a generator Disconnect Switch accessible to the utility be installed? ☒ Yes ☐ No  
Proposed location of Disconnect Switch, if applicable: Outside next to meter

Section 3. Installation Information & Certification

1. Installer ☐ Check if owner-Installed  
Installation Date: July 2015  
Installing Electrician: SunRay Solar, LLC  
State of NH License #: 12245M  
Mail Address: 124A Hall St  
City: Concord  
State: NH Zip Code: 03301  
Daytime Phone #: \_\_\_\_\_

Section 3. Installation Information & Certification continued

2. The system hardware is listed to Underwriters Laboratories standards to be in compliance with UL 1741 and IEEE 929-2000:

Signed (Vendor/Supplier): [Signature]

Name (printed): Michael Fay Date: 07-01-2015

Company: SunRay Solar, LLC

Company Address: 124A Hall Street, Concord, NH 03301

3. The system has been installed in compliance with the local Building/Electrical Code of

(City/County) NORTH FRIEDMANSBURGH

Signed (Electrician or Town Inspector): [Signature]

Print Name: DANIEL DICKSON Date: 7/14/15

*In lieu of signature by inspector, a copy of final inspection certificate may be attached.*

4. The initial start-up test required by PUC 905.04 has been successfully completed by the electrician.

Completed on 7-16-15 Witnessed By [Signature]

5. Utility signature to signify only receipt of this form, in compliance with the Commission's net metering rules PUC 900.

Signed (NHEC): [Signature]

Print Name: JOHN MCNEIL Date: 7.31.15

Signed (Electricity Supplier Representative): \_\_\_\_\_

Date: \_\_\_\_\_

6. Interconnection Date: 7.31.15

Applicant agrees to install and operate the system in accordance with PUC 900.

I hereby certify that, to the best of my knowledge, all of the information provided in this Application is true and correct.

Signature of Applicant: [Signature] Date: July 31, 2015

THE ELIGIBLE CUSTOMER-GENERATOR SHALL PROVIDE NEW HAMPSHIRE ELECTRIC CO-OP WITH A WRITTEN UPDATE OF THE INFORMATION ON THIS FORM AS ANY CHANGES OCCUR.